

LANGUAGE ASSISTANCE SURVEY

ENCLOSURE II

DOCUMENTS TO REVIEW

NAME OF PLAN:

Technical Assistance Guide – Specific

Please note that documents or information requested may be listed under more than one standard or section and it is not necessary to duplicate. Please identify and reference the location where the document or information initially appears in any subsequent location that requests the same document or information.

| LANGUAGE ASSISTANCE | Pre Site Visit Materials | On Site Materials |
|---|--------------------------|-------------------|
| LA-000 – Language Assistance Program Implementation | | |
| Samples of the Plan’s provider contracts (specifically highlighting any language regarding the provision of Language Assistance services) | | X |
| LA-001 – Language Assistance Policies & Procedures | | |
| <p>The Plan’s Language Assistance (LA) program and/or LA policies and procedures, including:</p> <ul style="list-style-type: none"> ▪ Enrollee Assessment ▪ Language Assistance Services (including translation and interpretation) ▪ Language Assistance Staff Training ▪ Language Assistance Program Compliance Monitoring ▪ The Plan’s definition of (or policies and procedures regarding) “all points of contact” where the need for language assistance may be reasonably anticipated ▪ The Plan’s definition of (or policies and procedures regarding) the “types of resources” needed to provide effective language assistance services to enrollees ▪ The Plan’s policies and procedures for informing enrollees of the availability of language assistance services ▪ The Plan’s grievance policies and procedures related to language assistance services ▪ The Plan’s policies and procedures for ensuring contracting providers are informed of the language assistance program and services ▪ The Plan’s policies and procedures for ensuring the proficiency of individual’s providing interpretation and translation services | X | |
| The job description of the individual(s) or committee(s) with overall responsibility for the Language Assistance (LA) program | X | |
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| LA-002 – Enrollee Assessment | | |
| Policies and procedures relating to the enrollee assessment and survey processes | X | |
| Data sources for completing the demographic profile | | X |
| The Plan's demographic profile (report or other documentation) | X | |
| Evidence of statistical analysis of the demographic data | X | |
| Enrollee linguistic needs survey | X | |
| Disclosure or notice to enrollees regarding the availability of LA services | X | |
| Samples of each of the following translated vital documents: <ul style="list-style-type: none"> ▪ Applications ▪ Consent forms ▪ Letters to enrollees regarding eligibility and participation criteria ▪ Notices pertaining to denial, reduction, modification, or termination of services and benefits and the right to file a grievance or appeal ▪ Notices advising LEP enrollees of the availability of free LA services and other outreach materials provided to enrollees | X | |
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| LA-003 – Language Assistance Services | | |
| Plan's LA Program and LA Policies & Procedures | X | |
| Workflow / Process Map / Algorithm for accessing interpreter services by point of contact. | X | |
| A list of all translated vital documents, and samples of at least 3 of the following documents: <ul style="list-style-type: none"> ▪ Applications ▪ Consent forms ▪ Letters to enrollees regarding eligibility and participation criteria ▪ Notices pertaining to denial, reduction, modification, or termination of services and benefits and the right to file a grievance or appeal ▪ -Notices advising LEP enrollees of the availability of free LA services and other outreach materials provided to enrollees ▪ Claims processing documents that require a response from the enrollee | X | |
| Internal interpretation/translation staff proficiency assessment tool | X | |

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| If the Plan has contracted with vendor, the vendor assessment tool and/or vendor contract language that establishes the proficiency of the vendor's staff providing LA services | X | |
| Sample of completed staff proficiency assessments | | X |
| Evidence of qualifications for health plan staff utilized for interpretation/translation services | | X |
| Log(s) or report(s) of LA services provided by the Plan (directly or through vendor contracts), including request date and time and LA service delivery date and time | X | |
| Log(s) or report(s) of LA services accessed through a provider's office | X | |
| Sample of contracts between the Plan and Provider incorporating language regarding LA program requirements | | TBD <i>(Based on Survey Strategy)</i> |
| Report of complaints and grievances related to LA services | X | |
| Grievance system codes for capturing complaints regarding the LA program or LA services | X | |
| Committee minutes of the Grievance Committee | | X |
| Committee minutes of the QM/Oversight Committee reviewing the Plan's LA Program | | X |
| Delegation policies and procedures, including those detailing the processes for LA services delegation and continued oversight of delegated entities | X | |
| Pre-delegation assessments | X | |
| Delegation contracts, letters of agreements, and/or memoranda of understanding related to LA services | | TBD <i>(Based on Survey Strategy)</i> |
| Delegation audit tools, forms, and report templates related to LA services | X | |
| Delegated provider LA program policies and procedures, if applicable | X | |
| Documentation that the Plan conducts a periodic audit of delegated activities and requires a corrective action plan for deficiencies identified with documentation of appropriate follow-up | X | |
| Plan's website (identifying all areas related to LA services, including but not limited to: notice of availability, translated vital documents, grievance forms and information, etc.) | X | |
| For Specialized Plans ONLY: <ul style="list-style-type: none"> ▪ Provider directory ▪ Provider quarterly language capability updates regarding any changes | X | |

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| | | |
| LA-004 – Staff Training | | |
| Language Assistance (LA) Program Staff Training Curriculum | X | |
| LA program Training Materials | X | |
| LA program Training Schedule | X | |
| LA Training Program Evaluation summaries | | X |
| Resumes of LA Program Trainers | X | |
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| LA-005 – Contracted Providers and the LA Program | | |
| Related Policies and Procedures | X | |
| Provider Contracts, including contract templates as well as a random sample of executed provider contracts | | TBD (Based on Survey Strategy) |
| Provider Manuals | X | |
| Sample Provider Newsletters | X | |
| Provider section of the Plan's Website | X | |
| Logs of provider complaints or grievances with the Plan regarding the LA program or services | X | |
| Provider Directory | X | |
| For Specialized Plans ONLY: Standards and/or criteria for determining bilingual provider and office staff proficiency | X | |
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| LA-006 – Compliance Monitoring | | |
| Related policies and procedures, including: <ul style="list-style-type: none"> Language Assistance Program Quality Assurance Program – LA Program (if incorporated) Processes for investigating adequate language assistance access for enrollees, system issues, and/or administrative problems; monitoring procedures including problem identification, evaluation, corrective action and follow-up monitoring. | X | |
| Compliance Work Plans | X | |
| QA Work Plans related to LA Program or Services | X | |
| Board of Directors, QA Committee, and Subcommittee meeting minutes where LA program and/or services were addressed | | X |
| Tracking and trending reports of enrollee Grievances (Internal Plan reports and External Reports to DMHC) | X | |
| Tracking and Trending Reports of Provider Complaints | X | |

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| Plan's Organizational Chart(s) | X | |
| Plan Compliance Audit Tool, Methodology, Outcomes | X | |
| Member/Enrollee Satisfaction Surveys or Consumer Ratings | X | |
| Provider Satisfaction Surveys | X | |
| Required Delegate Reports, if applicable | X | |
| Contract between Plan and Delegates, if applicable | | TBD <i>(Based on Survey Strategy)</i> |
| Plan-generated Reports to Monitor LAP Compliance | X | |
| Plan's Evaluation of LAP | X | |
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**End of Enclosure II
Language Assistance TAG**